

**SEVENTH OFF-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**WAKULLA CORRECTIONAL INSTITUTION**

for the

Physical and Mental Health Survey  
Conducted April 10-12, 2018

**CMA STAFF**

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CAP Assessment Distributed on January 13, 2021

## **CAP Assessment of Wakulla Correctional Institution**

### **I. Overview**

On April 10-12, 2018, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Wakulla Correctional Institution (WAKCI). The survey report was distributed on May 7, 2018. In June 2018, WAKCI submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the WAKCI survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than ninety days.

On September 25, 2018, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an on-site CAP assessment on November 28-29, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 21 of 27 physical health findings and 5 of 6 mental health findings were corrected at the Main Unit. Additionally, 10 of 13 physical health findings and 13 of 20 mental health findings were corrected at the Annex.

On February 14, 2019, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an on-site CAP assessment on April 5, 2019 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 6 of 6 physical health findings and 0 of 1 mental health findings were corrected at the Main Unit. Additionally, 3 of 3 physical health findings and 4 of 7 mental health findings were corrected at the Annex.

On July 10, 2019, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an on-site CAP assessment on August 16, 2019 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected on the Main Unit and 2 of 3 mental health findings were corrected at the Annex.

On November 19, 2019, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site CAP assessment on December 16, 2019 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings were corrected on the Main Unit and 0 of 1 mental health findings were corrected at the Annex.

On March 11, 2020, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site CAP assessment on April 3, 2020 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings

were corrected on the Main Unit and 1 of 1 mental health findings were corrected at the Annex.

On August 26, 2020, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site CAP assessment on September 16, 2020 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 0 of 1 mental health findings corrected at the Main Unit.

On December 13, 2020, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, the CMA conducted an off-site CAP assessment on January 8, 2021 to evaluate the effectiveness of corrective actions taken by institutional staff. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

## **II. Physical Health Assessment Summary**

### **A. Main Unit**

All physical health findings are closed.

### **B. Annex Unit**

All physical health findings are closed.

## **III. Mental Health Assessment Summary**

### **A. Main Unit**

The CAP closure files revealed evidence to determine that 0 of 1 mental health findings were corrected. One mental health finding will remain open.

<b>Finding</b>	<b>CAP Evaluation Outcome</b>
<b><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></b> <b>MH-2: In 3 of 6 records reviewed, documentation did not indicate the inmate was observed at the frequency ordered by the physician.</b>	<b>MH-2 OPEN</b>  Adequate evidence of in-service training was provided; however, a review of records indicated an acceptable level of compliance had not been met.

### **B. Annex Unit**

All mental health findings are closed.

#### **IV. Conclusion**

##### **Physical Health-Main Unit**

All physical health findings are closed.

##### **Physical Health-Annex Unit**

All physical health findings are closed.

##### **Mental Health-Main Unit**

MH-2 will remain open.

##### **Mental Health-Annex Unit**

All mental health findings are closed.

Until appropriate corrective actions are undertaken by WAKCI staff and the results of those corrections reviewed by the CMA, this CAP will remain open. As some of the necessary steps to correct findings require further institutional monitoring, closure may take as long as three months. Follow-up assessment by the CMA will most likely take place through an off-site evaluation.